

MISSOURI DEPARTMENT OF HEALTH AND SENIOR SERVICES STATE PUBLIC HEALTH LABORATORY

ALCO-SENSOR IV WITH PRINTER MAINTENANCE REPORT

RECEIVED

By Carol Day at 11:36 am, Dec 18, 2014 RT #7

*25541,									
Complete this report in duplica Send copy to Department of H							d whene	ver instrument is	repaired.
ALCO SENSOR IV SN 101600	PRINTER SN . 092.3576.581				DATE OF INSPECTION 12/05/2014				
LOCATION OF INSTRUMENT (STREET AND CITY) Midland Empire Alcoholo Task Force Breath Alcohol Test Tru				uck			TIME OF 2:41	INSPECTION OM	
CHECKLIST: Place a mark in the box by each item if found to be satisfactory or if operating within established limits. (Write in observed val-									
ues where determined.) Unmarked items must be corrected before using instrument.									
DIGITAL READOUT (ALL ELEMENTS OPERATIONAL)									
TEMPERATURE OF ALCO SENSOR (10°C - 40°C)									
PRINTER WORKING PRO	PRINTER WORKING PROPERLY								
☑ TIME AND DATE DISPLA	complete and the second and an experience of the second and	The second beautiful to the second payor of the second	(Maintella succession and succession and succession and succession and succession and succession and succession	takkana utattan an mitatan disukutin yanakad ya kuma ka ya ya ya		toolsen/terrently to the second terrent	, , , , , , , , , , , , , , , , , , , 		
BREATH ALCOHOL ACCURA	CY STANDAR	DS			water to the second day.		and a second of the second of		
SIMULATOR SOLUTION	☑ COMF	☐ COMPRESSED ETHANOL-GAS MIXTURE							
STANDARD SUPPLIER Intoximeters LOT #			_OT # <u>AG40</u>	# AG402002 EXP. DATE 01/20/2016					
SIMULATOR TEMPERATE	SIMULATOR TEMPERATURE (34°C ± 0.2°C) SIMU			MULATOR SN		SIMULATOR EXP DATE			
Run three tests using a state less. Check the box correst 0.100% STANDARD - 0.080% STANDARD - 0.040% STANDARD -	ponding to the MUST READ MUST READ	standard solt BETWEEN 0 BETWEEN 0	ition bein .095% an .076% an	g used. (PRIN nd 0.105% IN nd 0.084% IN	NTOUT A CLUSIVI CLUSIVI	ATTACHED) E E		,	
TEST 1101		TEST 2 ☞ .100				TEST 3 ♥ .100			
RFI DETECTOR OPERATI	NG								
INDICATE THE NUMBER OF BREATH TESTS IN THE FOLLOWING RANGES SINCE THE LAST MAINTENANCE REPORT: (DO NOT INCLUDE SELF-ADMINISTERED TESTS)									
REFUSALS 0 (00	4) 0	(.0509)	0	(.1014)	0	(.1519)	0	(OVER .19)	0
List any new parts and describe any alteration or modification that was made to restore the instrument to operate satisfactorily and within established limits (use other side if necessary).									
Instrument operating within all limits set forth by the Missouri Department of Health. 0.100 Dry Gas Standard, Lot #AG402002, Tank 42									
·									
INSPECTING OFFICER SIGNATURE						PRINT NAME			
· Money						Larry R. Stob	bs Jr.		
TYPE II PERINT NUMBER/EXPIRATION DATE 230311 12/11/2015					TELEPHONE NUMBER (816) 236-1474				
Return completed report to ti	2875 Jam	cohol Program		partment of F	lealth ar	nd Senior Servic	es, Soul	theast District Of	fice

	Uersion noi 814D TEST RECORD 88371 Temp Date Time XBAC Air Blank: 12/85/14 14:47 ,888 Subject Test: Man 25 12/85/14 14:47 ,188 Subject Name Coperator Name, I.B. Location	
V	AS IV Serial no: 101600 Upersion no: 014D TEST RECORD 00370 Temp Date Time XBAC Upid: RFI 12 12/05/14 14:44 Subject Name Subject Name Location Location	
20 111 Carial moi 181688	TEST RECOKD 88369 Temp Date Time XBAC Air Blank: 12/85/14 14:42 .888 Subject Test: Man 23 12/85/14 14:42 .188 Subject Name Subject Name Location	
	AS IV Serial no: 101600 Uersion no: 8140 TEST RECORD 80368 Temp late Time XBAC Air Blank: 12/05/14 14:41 .000 Subject Test: Man 22 12/05/14 14:41 .101 Subject Name Location Location	•



STATE OF MISSOURI

DEPARTMENT OF HEALTH AND SENIOR SERVICES **BREATH ALCOHOL PROGRAM**



PERMIT TYPE II

LARRY R STOBBS JR

is hereby authorized to instruct and supervise operators, train instructors, inspect, calibrate, perform field service and repairs, and operate the following breath analyzer(s):

ALCO-SENSOR IV WITH PRINTER, DATAMASTER

for the determination of the alcoholic content of blood from a sample of expired air. Permit issued under the provisions of sections 577.020 through 577.041, RSMo and 306.111 through 306.119 RSMo.

DATE12/11/2013	when
	DIRECTOR OF STATE PUBLIC HEALTH LABORATORY
NUMBER 230311	Lal Vasterling
EXPIRES 12/11/2015	
UD 500 0774 (C 10)	LAD 4 (DC 40)

LAB-4 (R6-10)



Permit No 230311

Date Issued 12/11/2013

Date Expires 12/11/2015